Attorney Docket No: 3115.00017

CLAIMS:

1. (Currently Amended) A method for unblocking immunization of an individual incapable an immune response to a pathology at a regional lymph node by:

promoting differentiation and maturation of immature dendritic cells in a regional lymph node and;

allowing presentation by resulting mature dendritic cells of antigen to T-cells to gain immunization of the T-cells to the antigen.

- 2. (Currently Amended) A <u>The</u> method according to claim 1, wherein said promoting step is further defined as administering a natural cytokine mixture (NCM) perilymphatically into lymphatics that drain into lymph nodes regional to a lesion to be treated.
- 3. (Currently Amended) A <u>The</u> method according to claim 2, wherein the lesion is cancerous or another persistent lesion.
- 4. (Currently Amended) A <u>The</u> method according to claim 3, wherein the presented lesion is infectious.
- 5. (Currently Amended) A <u>The</u> method according to claim 1, wherein the antigen is an endogenous antigen.
- 6. (Currently Amended) A <u>The</u> method according to claim 1, wherein the antigen is an exogenous antigen.
- 7. (Currently Amended) A <u>The</u> method according to claim 2 wherein said administering step is further defined as injecting the NCM perilymphatically, intralymphatically, intranodally, intrasplenically, subcuntaneously, intramuscularly or intracutaneously.

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8. (Withdrawn) A method of inducing immunization to cancer or persistent lesions by administering an effective amount of an exogenous antigen and an adjuvant consisting of a natural cytokine mixture (NCM).

- 9. (Currently Amended) A <u>The</u> method according to claim 2, wherein said administering step is further defined as administering an NCM including IL-1, IL-2, IL-6, IL-8, δ IFN and TNF α .
- 10. (Withdrawn) A method according to claim 8 wherein said administering step is further defined as injecting the NCM perilymphatically, intralymphatically, intranodally, intrasplenically, subcutaneously, intramuscularly or intracutaneously.
- 11. (Withdrawn) A method as set forth in claim 1 further including the step of overcoming mild to moderate T cell depletion and restoring T cell immune response by inducing production of naïve T cells.
- 12. (Withdrawn) A method according to claim 11, wherein said inducing step is further defined as administering a natural cytokine mixture (NCM).
- 13. (Withdrawn) A method according to claim 11 wherein said administering step is further defined as injecting the NCM perilymphatically, intralymphatically, intranodally, intrasplenically, subcutaneously, intramuscularly or intracutaneously.
- 14. (Withdrawn) A method according to claim 12, wherein said administering step is further defined as injecting an NCM including IL-1, IL-2, IL-6, IL-8, δ IFN and TNF α .
- 15. (Currently Amended) A <u>The</u> method according to claim 9, wherein said administering step includes administering about 150-600 units of IL-2 per injection in the NCM.

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16. (Currently Amended) A <u>The</u> method according to claim 1, wherein said unblocking steps are further defined as codelivering cyclophosphamide and a nonsteroidal anti-inflammatory drug (NSAID).

17. (Withdrawn) A method of treating a cancer or other persistent lesion in an immune suppressed patient by administering an effective amount of a natural cytokine mixture as an adjuvant to endogenous or exongenously administering antigen from the cancer or persistent lesion.

18. (Withdrawn) A method according to claim 14, wherein said administering step is further defined as injecting an NCM including IL-1, IL-2, IL-6, IL-8, TNF α and δ IFN.

19. (Withdrawn) A method according to claim 18, wherein said administering step is further defined as injecting an NCM including IL-1, IL-2, IL-6, IL-8, TNF α and δ IFN.

20. (Withdrawn) A method according to claim 17, further including the steps of blocking endogenous suppression of T-cells directly or indirectly by the endogenous lesion being treated.

- 21. (Withdrawn) A method according to claim 11, wherein said inducing step is further defined as codelivering cyclophosphamide and a nonsteroidal anti-inflammatory drug (NSAID).
- 22. (Currently Amended) A <u>The</u> method according to claim 16, wherein the NSAIDS is selected from the group including <u>INDOMETHACIN</u>, <u>IBUPROFEN indomethacin</u>, <u>ibuprofen</u>, <u>rofecoxib</u> (VIOXX®), <u>celecoxib</u> (CELEBREX®) and other related compounds.
 - 23. (Withdrawn) A method of vaccine immunotherapy including the steps of:

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inducing production of naïve T-cells and exposing the naïve T-cells to endogenous or exogenous antigens.

24. (Withdrawn) A method according to claim 23, wherein said exposing step is further defined as exposing the naïve T-cells to endogenously processed peptide preparation resident in regional nodes of a patient who possesses a lesion.

- 25. (Withdrawn) A method according to claim 24, wherein the lesion is cancerous or infectious.
- 26. (Withdrawn) A method according to claim 23, wherein said exposing step is further defined as administering an exogenously produced antigen.
- 27. (Withdrawn) A method according to claim 23, wherein said antigen is otherwise non-immunogenic peptide.
- 28. (Withdrawn) A method according to claim 23, wherein said exposing step is further defined as immunizing he naïve T-cells with matured peptide presenting dendritic cells at a lymph node distal from a lesion to be treated.
- 29. (Withdrawn) A method of treating lymphocytopoenic by administering an effective amount of a natural cytokine mixture.
- 30. (New) The method according to claim 1 further including the step of stimulating naïve T-cell production.
- 31. (New) The method according to claim 1 further including the step of actuating dendritic cells to promote antigen presentation.